Under the Paperwork Reduction A		espond to a collection of information unless it displays a valid OMB control number						
Effective on 12	Complete if Known							
Fees pursuant to the Consolidated App	Application Number		10/607,665-Conf. #8043					
FEE TRAN	Filing Date							
For FY			Kathryn G. RASMUSSEN					
	Examiner Name D.		D. G. Bonshoo	D. G. Bonshock				
Applicant claims small entity	Art Unit							
TOTAL AMOUNT OF PAYMENT (\$) 940.00			Attorney Dock	Attorney Docket No. 5486-0115P				
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
X Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
x Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17								
FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
	FILING FE		EARCH FEES		INATION FEES			
Application Type Fe	Smal c (\$) Fe	II Entity ee (\$) Fee	(\$) Small Entit (\$) Fee (\$)	Y Fee (\$	Small Entity Fee (\$)	Eone B	aid (\$)	
		165 54		220	110	1 668 1	aid (a)	
		110 10		140	70			
		110 33		170	85			
		165 54		650	325			
			0 0	0.00	0			
2. EXCESS CLAIM FEES				·	Ü	***************************************	Small Entity	
Fee Description Fee (\$							Fee (\$)	
Each claim over 20 (including Reissues)						52	26	
Each independent claim over 3 (including Reissues)						220	110	
Multiple dependent claims							195	
Total Claims Extra Cla	Fee Paid (\$)	id (\$) Multiple Depen						
					Fee (\$)	Fee Paid (\$	1	
HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)								
Indep. Claims Extra Claims Fee (\$) Fee Pald (\$) 4 -4 or HP = x =								
HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer								
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
							·aid (\$)	
- 100 = /50 = (round up to a whole number) x 4. OTHER FEE(S)							Daid (\$)	
Non-English Specification \$120 for (no well)								
Other (e.g. late filing surcharge) 1801 Sequest for continued examination (RCE) (see 37 810.00								
state timing satisfaction for response within first month 130.00								
SUBMITTED BY								
Signature Regist (Attorn				29,680) Telephone	(703) 205	5-8000	
Name (Print/Type) Michael K/Mutter					Date	July 20, 2009		
Jillondor ra ma						, zo,	2000	